

[Company Name]
[Address]
[City, State, Zip Code]

[Date]

[Employee Name]
[Employee Address]
[City, State, Zip Code]

Subject: Notice of Furlough and Benefits Continuation

Dear [Employee Name],

Please be advised that due to [reason for furlough, e.g., economic downturn / seasonal slowdown], [Company Name] is implementing a mandatory furlough. Your furlough will begin on [Start Date] and is currently expected to end on or about [End Date].

During this period, you remain an employee of the company, but you are not permitted to perform any work or access company systems. This action is intended to be temporary.

Health and Welfare Benefits

Regarding your benefits, we are pleased to inform you of the following:

- **Medical, Dental, and Vision Insurance:** Your coverage will continue during the furlough period.
- **Premium Payments:** [Company Name] will continue to pay the employer portion of your premiums. You are responsible for the employee portion, which will be handled by [method, e.g., arrears deduction upon return / direct billing].
- **Life and Disability Insurance:** These benefits will [remain active / be suspended] effective [Date].

Paid Time Off (PTO)

You [may / may not] use accrued PTO to supplement your income during this time. Please contact [Contact Name/Department] to make this request.

Unemployment Insurance

You may be eligible for unemployment insurance benefits during this furlough. You should contact your state's unemployment office immediately to file a claim.

We will keep you updated regarding your return-to-work date. Please ensure we have your current personal email and phone number on file.

If you have questions regarding your benefits or this notice, please contact [Name/Department] at [Phone Number/Email].

Sincerely,

[Sender Signature]

[Sender Name]

[Title]